Supreme Court of Virginia
Office of the Executive Secretary
100 North Ninth Street, Third Floor • Richmond, Virginia 23219
Phone: (804) 786-6455 • Email: galdrisadmin@vacourts.gov • Fax (804) 786-1301

Waiver of Initial Qualification Requirements
Qualification as a Court-Appointed Counsel for Parents and Guardians -- § 16.1-266.1

Attorney Name:

_____
Last Name First Name Middle Name

Address:

_____ VSB #: _____

_____ Office Phone: _____

List All JUDICIAL DISTRICTS Where You Will Accept Appointments: _____
_____

WAIVER OF INITIAL QUALIFICATION REQUIREMENTS

☐ In accordance with Standard I.A. of the Standards for the Qualification of Attorneys Appointed Pursuant to Virginia Code § 16.1-266 to Represent Parents and Guardians in Child Dependency Cases, I hereby certify that I am a duly certified guardian ad litem as of July 1, 2026.

☐ In accordance with Standard I.B. of the Standards for the Qualification of Attorneys Appointed Pursuant to Virginia Code § 16.1-266 to Represent Parents and Guardians in Child Dependency Cases, I hereby certify that I have, on or before July 1, 2026, served as either a guardian ad litem or attorney for a parent or guardian in at least 20 child dependency cases from initiation of a petition to the disposition of that petition.

_____ _____
Applicant Attorney – Signature Date